

# THE BOSTON MEDICAL AND SURGICAL JOURNAL.

---

VOL. VII.] WEDNESDAY, NOVEMBER 28, 1832. [NO. 16.

---

## COMPARATIVE TREATMENT OF CHOLERA.

*Comparison of various Modes of Treatment in Cholera.—Efficacy of Salines.* By P. BOSSEY, M.R.C.S.

IN prosecuting an inquiry of such importance to the welfare of the community, and of such deep interest to the profession (the saline mode of treatment in cholera), it cannot be too generally lamented that decisive and final opinions have been hastily promulgated, by some extolling the practice as in almost every case infallible, and by others declaring it totally inert and injurious.

Considering that its employment has been hitherto by far too limited to warrant its general assumption or rejection, the object of this paper is to add a few facts to those already published, and thereby promote the laudable purpose of deciding correctly upon its efficacy.

Cholera appeared in the Convict Hospital Ship, Woolwich, about the middle of March, but occurred in isolated cases until the 5th and 6th of May, when its irruption became general and the cases numerous.

Of about eight hundred individuals, of whom this establishment was then composed, a very great majority were affected with premonitory symptoms. Many facilities being offered, the utmost vigilance was employed to secure their early detection. All the men were medically inspected three times daily: if any individual had three evacuations while at labor, he was placed under observation, and his dejections examined. By this means the cases of sudden, profuse, and serous diarrhœa, amounted for some time to at least 30 daily. Some of these had vomiting, faintness, and cramps. Most of them were attacked in the morning, and were treated by a single dose of 5 or 6 grains of calomel combined with 1, 2, or 3 of opium, followed by two ounces of the saline mixture every hour; and, if the purging continued, a starch enema, with 2 drachms of the carbonate of soda, 4 of common salt, and 1, 2, or 3 of the tincture of opium; with gruel for diet. Under this regimen, with subsequent small doses of rhubarb and castor oil, most of these persons recovered, and were never admitted or reported as cholera.

Satisfied that as much was effected as the most unremitting and assiduous nursing, and the steady employment of remedies, could accomplish, the following table and remarks are offered, as affording the results, carefully and impartially collected.

Treatment.	Cases.	Deaths.	Recov.
By Bleeding and Stimulants . . . .	13	5	8
By Stimulants only . . . . .	4	1	3
By Bleeding and Salines . . . . .	56	11	45
By Salines only . . . . .	65	9	56
Hospital Patients . . . . .	10	10	0
Total	148	36	112

The treatment described as 'Bleeding and Stimulants,' consisted of venesection to the amount of 6 or 8 ounces; the administration of salt and mustard emetics; of hot salt water enemata; hot air bath; bottles of hot water and mustard cataplasms externally; and of brandy, ammonia, and Cayenne pepper, in liberal and oft-repeated doses internally. No opium was given, as these were the earliest cases, and we were desirous to observe the disease unobscured by its effects. Thirteen were subjected to this treatment, five of whom were lost in periods of 5, 9, 10, 11, and 24 hours from admission; and of the eight who recovered, three were moderately and five severely collapsed. Only one of these had the insensible purging, said to be a very fatal symptom; and he appeared to derive most benefit from the mustard poultices, which were extensively applied for several hours.

The cases treated by 'Stimulants only,' were seen early. Two had severe premonitory symptoms; one was moderately collapsed; and one died in 72 hours of muco-enteritis.

Until reading the letter of Mr. Wakefield, published in the Medical Gazette, on the efficacy of the saline mode of practice, the principal dependence had been placed, in collapsed cases, upon cautious bloodletting, salt and mustard emetics, and mustard poultices. The hot bath, although always at command, had been found in many cases impracticable; and the hot air bath decidedly injurious. Having prepared a mixture, every two ounces of which contained one of the powders used at Cold-Bath Fields, with a small quantity of brandy\*, all future cases were treated (after the above preliminary measures had been practised) to the effect of this dose, repeated every half hour, until reaction was accomplished, when small doses of calomel and opium were given, every two hours, till the gums were slightly sore, and healthy secretions established; after which the sulphate of quinine and mild aperients usually completed the cure. Fifty-six were thus treated, of whom eleven died, at the following periods after the commencement of the treatment:—

In six hours . . . .	1 (a relapse.)†
— twelve do. . . .	5 (1 a relapse.)
— fifteen do. . . .	1
— eighteen do. . . .	2
— twenty-six do. . . .	1
— four days . . . .	1 (a relapse.)

\* Although in Dr. Stevens's practice stimulants were entirely prohibited, a small proportion of brandy was added to this mixture, because most of the patients had previously led irregular lives, and been long accustomed to smoking and dram-drinking.

† These relapses were all previously recovered from every appearance of danger, but are included as recoveries.

Of the recoveries, seven had severe premonitory symptoms; fourteen were moderately, twenty-five severely collapsed; fifteen had insensible serous purging; and in several, the pulse at the wrist absent for two or three days. A few had smart inflammatory affections of the abdominal viscera, and one or two had partial dropsy during their recovery.

Under the treatment described as 'Salines only,' are included all those cases in which, during collapse, the following constituted the whole treatment:—A salt water emetic, followed by a dose of the saline mixture every quarter and half hour; by an effervescing draught, with an excess of soda, every hour; by the hourly administration of an enema, composed of starch, carbonate of soda, and common salt, and occasionally the Tr. Opii; by saline beverage, consisting of barley-water, given *ad libitum*, to every pint of which two drachms of carbonate of soda had been added; and by mustard poultices.

Of sixty-five cases so treated, nine were fatal, the period of decease being respectively,

In nine hours from admission . . .	4
— twelve hours . . . . .	2
— twenty-four do. . . . .	1
— thirty-six do. . . . .	2
	<hr/>
	9

In the case fatal in twenty-four hours, there was partial reaction and relapse; and the patient who died in thirty-six hours was admitted early, and treated by saline injection into the veins.

Of the fifty-six recoveries, sixteen had premonitory symptoms; ten were moderately, and thirty severely collapsed; seventeen had insensible purging.

Under every variety of treatment, the vomiting and hiccup were occasionally obstinate during recovery, and a few had partial dropsy; but it was only requisite to employ leeches in four cases; venesection in one (a month after, for anasarca); and of the whole number of cases (148), only two were fatal after re-action: one of these was an hospital patient upwards of 70 years of age, who was treated by salines only, lived a week, and died of apoplexy; and the other the case of enteritic inflammation already mentioned.

The hospital cases were such as would have been fatal under any acute disease, being patients far advanced in phthisis, fever, and in one or two the arteries were ossified from extreme old age, and death arose from congestion during re-action.—*London Medical Gazette.*

#### DEEP-SEATED ABSCESS OUTSIDE OF THE LUMBAR VERTEBRÆ.

BY SILAS JAMES, M.D.

[Communicated for the Boston Medical and Surgical Journal.]

THIS might be termed Lumbar Abscess were it not the custom to affix that name to chronic abscess implicating the psoas muscles, which points about the groin, thigh or perineum, and which is usually found in scro-

fulous constitutions ; whilst the kind of abscess now referred to is of an acute character, is seated between the spinous and transverse processes of the lumbar vertebræ, under the dense fascia and thick layers of muscles, and is usually caused by a violent strain of some muscle near its insertion. From the resistance existing to the pointing of the abscess and to the discharge of matter, such abscesses endanger the life of the patient. In such cases there is a violent symptomatic fever, preceded and accompanied by heavy pain in the loins, difficulty of lying on the back, and at last even on the sides. The part swells, presenting a broad surface slightly elevated, and although there is no pointing to it, nor any fluctuation of matter to be felt, yet the violence and duration of the symptomatic fever, and the local suffering, leave no doubt that matter is formed.

In such cases shall the surgeon plunge a scalpel through all the integuments in search of matter ? The objections to this course are—1. 'The best modern surgeons make it a common maxim to open few acute abscesses.' 2. The incision must be deep, consequently painful, and there is some uncertainty whether it will hit upon the most favorable place for giving exit to the matter. On the other hand, shall the surgeon wait till symptomatic fever destroys the patient, or till the matter is pressed into the interstices of the neighboring muscles ? The method adopted in the following case seems preferable to either of these.

J. G. complained of severe pain over the lumbar vertebræ, which was soon followed by severe symptomatic fever. He dated the complaint from a sprain in the back, occasioned by lifting. He was depleted freely both with the lancet and cathartics, took saline and antimonial medicines, and was blistered over the loins. The symptoms abated for a time, but returned with increased violence, accompanied with a swelling like that above described. His general health failing rapidly, Dr. Parsons, of Providence, was called. As there was no fluctuation of matter perceptible, fomentations and cataplasms were directed to the part till matter should be felt, and then the abscess directed to be opened. Dr. P.'s residence being twenty or thirty miles distant, he did not see the case again till the expiration of a week, when the patient's life appeared in imminent danger from symptomatic fever. Still no matter could be felt in the swelling. It was now concluded to make a longitudinal incision into the centre of the swelling, deep enough to penetrate the fascia and some of the muscles, with the view of taking off the pressure that resisted the pointing of the abscess. The incision was made an inch and a half deep, and two inches long ; a tent was introduced, and the whole covered with cataplasms. The abscess immediately became prominent at the wound, and in two days burst through it, with a copious discharge of matter, which not only saved the patient's life, but gave immediate relief to the symptomatic fever, and prepared the way for a speedy and entire recovery.

Another case has come within my knowledge, where a similar mode of treatment was followed by the same favorable result.

*West Greenwich, R. I., November, 1832.*

## CLINICAL NOTES.

BY JONATHAN SIBLEY, M.D. OF UNION, MAINE.

[Communicated for the Boston Medical and Surgical Journal.]

*Phlegmasia Dolens.*

WHILE I was a student with Dr. Corrigan, of Concord, in the State of New Hampshire, I saw one severe case of phlegmasia dolens. To the affected limb were applied green leaves from the bushes, and I believe a solution of Sal. Ammonia. I visited the patient but once.

When I had been in practice in Maine twenty years, I had been present at the births of about eight hundred and fifty children. Besides these, I had seen, perhaps, a hundred other women in child-bed. But among all these, I had never seen a single case of this kind. Two cases then occurred to me—one succeeding the other after about six months. These women had both been made pregnant by the same man. The first was unmarried and very young; her labor was severe indeed. The scissors and crotchet were used, and the child, of course, was lost. In a week or ten days after delivery, the creature was attacked with this complaint, which appeared to partake of the nature both of rheumatism and dropsy. It was ushered in by cold chills, succeeded by heat, with pain and swelling in one leg. The pain appeared somewhat like that of rheumatism. The skin of the tumefied leg had a smooth and shining appearance, but retained its natural color.

Warm baths were first applied to the leg for a day or two. They did no good, but were thought to do harm. The other applications to the limb were olive oil and camphor; and after that, camphor, soap, and opium, dissolved in proof spirit. Much friction was used upon the limb for several weeks, but no bandages were applied. When the limb first affected had mended considerably, the other was attacked in the same way, but more severely than the first. The same remedies which had been applied to the first limb (except the baths), were applied to the second, and continued about the same length of time. This case was otherwise treated much on general principles—cathartics and anodynes, as occasion required. The patient was confined many weeks to her bed and to her room, and did not recover the perfect use of her limbs for many months; but at no time did the disease assume a formidable appearance, nor can I learn from my books that other remedies have succeeded better in other cases of this kind.

In the other case, the labor was severe and lasted long. I tarried with the woman fifty hours, and then succeeded with the forceps.

Two or three weeks after delivery, this patient was attacked in one leg, like the other case, but not so severely. Olive oil with camphor was applied, and friction was used upon the limb, as in the first case; but there was no occasion for remedies very long. The disease wore gradually away, and the patient recovered a much better state of health than she had before enjoyed.

I find by experience that puerperal complaints are more or less severe as they attack the patients sooner or latter after delivery.

It was expected at the commencement of this complaint, in each of

these cases, that the spiral bandage would be applied to the affected limbs, on the decline of the complaint, after the inflammation had subsided. But as the subjects were young, and the fibres seemed readily to assume their accustomed tone and the limbs to regain their natural shape and size in a reasonable time, bandages were neglected.

P. S. Since writing the above cases of phlegmasia dolens, I have seen another case of the same kind which succeeded an abortion. In this case the bandage was eminently useful after the inflammation had subsided.

#### *Scarlatina Anginosa.*

A child in a large family was seized with Scarlatina Anginosa in the fall of the year. There was nothing very noticeable in the case. The disease was mild, but the symptoms very clearly marked. No person took the disease from this child, nor was it possible for the patient to have taken it from any other person.

The next year, about the same period of the season, the same disease broke out again in the neighborhood where the first child was sick, and about ten or twelve children had the complaint in three or four families. All did well. In this last instance it did not appear that the different families communicated the disease to each other.

For several years before these cases of scarlatina anginosa occurred, I do not recollect to have heard of a single case of this complaint in this section of the country. Six or eight years have now passed away since their occurrence, and not another case of the kind has been heard of.

In ancient times, the barbarous people imputed the cause of epidemic or sporadic diseases to the anger of some particular divinity. A modern writer (Mr. Webster) has attempted to connect them with explosions of volcanoes, or the devastation of earthquakes! Another writer (Mr. Sullivan) thought the effluvia from our balsam trees (fir) had great influence in preserving the health of the inhabitants of this province. Sydenham referred the predisposing cause of epidemic diseases to some 'peculiarity in the constitution of the atmosphere.' We read in Belknap's History of New Hampshire that the physicians of Boston, in the year 1735, published their opinion of the *throat distemper* which prevailed at that time, and said it proceeded entirely from 'some occult quality of the air.' The mystery of contagion, I fear, will never be unveiled to the human mind. It may be some unknown, occult quality of the air. What vehicle but the air could carry the spotted fever through all the Northern States and a part of Canada in a single winter? And how could contagion subsist in a cold wintry wind?

Can scarlatina anginosa come by chance, or its seeds spring out of the ground? Who first had the smallpox? Who had the measles first? Has every succeeding case of these diseases been communicated by contagion or infection, from those who were sick to those who were well?

#### *Arm and Funis Presentation.*

I visited a woman in travail who had had several children. I found the funis descending, followed by an arm; os uteri fully dilated, and the waters discharging. I introduced my hand far into the uterus, and seized with two fingers a foot, which I cautiously extracted through the pelvis

and vagina, and secured it with a noose in a garter. I then sought for the other foot, which I found and brought down with the former. With cautious diligence I soon finished the operation; but the child was dead! there had been pressure upon the funis a little too long. Could I have gained a single minute in extracting this child after the feet were brought down, I presume it would have been born alive.

---

**INFLUENCE OF OCCUPATION ON HEALTH.—NO. I.****BY E. G. DAVIS, M.D.***[Communicated for the Boston Medical and Surgical Journal.]*

IN making a division of the arts with reference to the modes in which they may affect, favorably or otherwise, the health of those who practise them, I shall follow the plan which seems best suited to convey a distinct notion of the prevalent circumstance in each, without limiting myself to any strict accuracy of scientific arrangement. In general, I shall consider first those trades, in the prosecution of which, no unhealthy substance is generated, but which may be injurious by their influence on the muscular system, or in other modes; and secondly, those in which some noxious agent, either solid, liquid or gaseous, becomes the generating principle of disease. Each of these general directions will contain several classes, and under these I shall name the particular professions which belong to them.

*Of the Occupations which involve no unhealthy Agent.*

**CLASS I.**—*Those which require the employment of great muscular force, and bring the muscular system generally into exercise.* To this class may in the first place be referred the various descriptions of persons employed in the lifting or conveyance of burdens. Such are porters, stevedores, handcartmen and truckmen. This division includes perhaps the employments most favorable to the development of the muscular system, and indeed to the health generally, when the natural tendency is not interfered with by some accidental circumstance. This is peculiarly true of the latter class, who in addition to the advantages enjoyed by the others, of the universal exercise of the muscles, of constant exposure to the air, and of regularity in the hours of labor, possess also the important advantage of uniform and steady employment. The muscular system of this description of persons is singularly well developed, the body uniting force and activity to a remarkable degree. The exertions required by the business are such as to render it most appropriate for those who are naturally vigorous, and perhaps to deter others from undertaking it; and this may be one cause of the generally robust appearance exhibited by this class. The occupation is not often interrupted by sickness; and when circumstances render it necessary, may be pursued to a late period in life. I have known severe rheumatism to be induced by the exposure in a few individuals, but am not disposed to regard this as a frequent effect, when the system has not been predisposed to it by intemperance.

If we would characterise the physical evils to which these occupations



are subject, they are to be found less in the diseases which they induce, than in the accidents to which they expose those who practise them. Such are fractures of the limbs, dislocations, sprains, contusions from blows, and ruptures. These are the misfortunes by which even the most robust and vigorous are made to bear their testimony to the weakness of human nature.

Among the other occupations which bring the muscular system uniformly into exercise, may be mentioned those of house and shipwrights, coachmakers, pumpmakers, coopers, masons, bricklayers, &c. These may all be considered healthy occupations, as being exercised for the most part in the open air, and as affording general exercise to the limbs; and accordingly those who practise them in general give evidence of their possessing abundant corporeal vigor. Neither are there many material circumstances to distinguish them in this respect from one another. Masons who work on chimneys use less muscular force than others, and are less favorably situated in regard to position. They are also exposed to the dust of the lime, which exerts an unfavorable action on the eyes and skin. The mortar, however, is undoubtedly a healthy agent. I have seen it somewhere quoted, as a maxim among workmen, that bricklayers and plasterers never die. Coopers are subjected to some inconvenience on account of the stooping posture, which for the most part their business requires. This at first is apt to affect the head; but habit generally renders it a matter of indifference.

The occupation of the *smith* is somewhat peculiar, and therefore deserves a separate consideration. The trade is one peculiarly well fitted for the development of muscular power. The poets of ancient times could find no more appropriate employment for their giants than to forge the thunderbolts of Jove in the caves of *Ætna*. The employment of the smith is sufficiently varied to bring all the limbs into vigorous action, and no part suffers from disuse. The action of the arms is especially favored; and by the degree in which the circulation is thrown into these limbs, they become remarkably large, strong and muscular. The smith indeed does not work in so pure an atmosphere as those whose professions have just been considered. The eyes are exposed to the action of the smoke, and the body subjected to considerable variety of temperature. These, however, seldom produce inconvenience or disease; and those who possess good constitutions and maintain steady habits, are in little danger of being injured by this employment. It is, however, less well suited for those naturally feeble, who sometimes prove unequal to the exertion it requires. Smiths are not peculiarly liable to accidents. A circumstance of occasional occurrence is the separation of small spicule of iron, in a state of ignition, which striking on the eye, destroy a small portion of the investing membrane or outer coat, and thus form a cavity in which they remain imbedded. When carefully extracted they leave a small ulcer, which however readily heals.

**CLASS II.**—*Professions which require the use of certain muscles to the neglect of others, or which render necessary in their exercise some vicious or constrained posture.* This class includes a considerable number of artisans, to whom the description applies in different degrees. The worst evils of restraint are perhaps inflicted on young children. When



these are apprenticed to a trade at a very early age, and obliged to sit or stand in one position for many hours, the limbs are cramped, and the body is prevented from acquiring its due development. There is probably no portion of a dense population which suffers more from the injuries of trades than young children. In the manufacturing towns in England, the confinement of children to labor amounts to absolute cruelty, and has in some instances rendered necessary the interference of law to protect them from the inhumanity of parents and masters. In Leeds, children of eight, seven, and even six years of age are placed in manufactories, and labor from 12 to 14 hours a day, with intervals scarce sufficient to swallow their meals. That this system involves the ruin of the constitution, that it prevents alike the development of mind and body, that it lays the foundation for disease and brings on premature decay, scarce need be added. Young children ought never, under any circumstances, to be confined to a trade. The plain dictate of nature is to allow them the free use of their limbs, that they may expand into proper proportions, and acquire their due growth. They require the open air and the unshackled use of their limbs, and the uneasiness they manifest when deprived of them is a sufficient proof that such was never the design of nature and must be injurious. Even among us, this principle is too often lost sight of, and too many children are sacrificed to the avarice of parents. Females, in a particular manner, suffer from this cause. It is not too much to say that girls under fourteen years of age, working in an unvarying posture for 12 hours out of the 24, can scarce by possibility retain their health and vigor.

---

## BOSTON MEDICAL AND SURGICAL JOURNAL.

---

BOSTON, NOVEMBER 28, 1832.

---

### MARCH OF THE CHOLERA.

WE were in hopes to be able to present our readers with a detailed account, derived from authentic sources, of the progress of this disease through the country during the last two months. As yet, however, we can give only gleanings from the papers of the day, the statements in which are in many instances extremely vague and unsatisfactory. It appears that in the latter part of September it had extended as far south as Edenton in North Carolina, and westward to St. Louis. At Cincinnati, thirty deaths occurred previous to the 10th of October. During the week ending the 17th, the victims to this disease were no fewer than 117. The usual mortality in that city is from 25 to 30, of all diseases. The succeeding week the mortality was still greater. The week ending Oct. 31st, the deaths from cholera were 104. It would appear from this, that, thus far, no city in this country has been more severely afflicted. At

Louisville, in Kentucky, up to Nov. 1, there had been 28 deaths. At St. Louis, during 14 days preceding the same date, there had been 140 deaths from cholera. Since that time it appears to have subsided. Two other places, mentioned as having been subjected to its ravages, are Natches (Mississippi), and Madison (Indiana): It has appeared at Folly Island near Charleston (S.C.), and, by the last accounts, ten deaths had occurred in one day. It appears now to have united with the yellow fever in the work of destruction at New Orleans. On the week ending the 27th October, the number of interments was 192; the numbers from cholera and yellow fever respectively were not ascertained. The deaths on the 31st were 133, and on the 1st of November 177. It is now on the decline.

There are some circumstances attending the outbreaking and spread of the disease at Folly Island, that are remarkable, inasmuch as they show in a strong light the communicability of the disease by contagion. A vessel bound from New York to New Orleans, and having the cholera on board, was wrecked on that island. The disease extended among those connected with the vessel, and, from them, to other inhabitants of the island. A guard was established by the Police of Charleston to prevent any intercourse between the sick and the inhabitants of that city. Notwithstanding this, several persons obtained access to the vessel, and returned to Charleston; and most of them, immediately after, sickened of the cholera and died. The habits of these persons were probably such as predisposed them to the disease; but no reasonable man will contend that there is a shadow of probability that they would have had it, at that time, had they remained quietly at home and not visited the island.

The Charleston police, after a due consideration of all the circumstances of the case, ordered the vessel and cargo to be wholly burnt, which order was thoroughly executed. It is to be hoped that their vigilance may be effectual in preventing the introduction of the malady; although hospitals have been established, and other measures adopted for the purpose of mitigating its terrors should it gain access to the city.

#### URTICARIA.

This disease is well known to be frequently induced by gastric disorder, and especially by the irritation of improper articles of diet. In some persons, the use of particular descriptions of fish will uniformly bring on an attack of the disease, which continues till the offending cause is removed. In this form the affection is sufficiently familiar; but the fact has not so often been noticed, how liable the malady is to become chronic by the use of improper food, or in connection with chronic dyspepsia. In this case its form is usually intermittent, occurring in paroxysms generally at night, varying in severity according to several circumstances, but particularly more severe in winter than in summer. In some few cases it has appeared to come on in the former season simply as a consequence

of interrupted transpiration by the skin, without any appreciable gastric derangement. Of the instances in which the disease has become chronic, one of the most remarkable we have met with is related by a Mr. Budgley, in the London Medical Gazette of the last year. A child about three years of age had been affected with the disease for 13 months, accompanied with irregularity of bowels, cough, a coated tongue, and other symptoms of deranged digestion. Various remedies had been proposed by successive medical attendants, but none had been attended with any advantage. The eruption made its appearance every night; not half an hour elapsing after the child was put in bed, before the skin of the back, arms, thighs and legs, were covered with the characteristic wheals, producing the most intense irritation. On inquiry, it was found that he took his meals with the family, and partook of whatever was provided for them. The use of vegetables was particularly encouraged, under an idea that they were salutary, and he was occasionally indulged in the use of wine. The case was treated by the substitution of farinaceous and animal food of the lightest kind, the interdiction of vinous liquids, and the employment of gentle aperients; under the use of which the child gradually recovered.

Where the cause of the malady is a single improper meal, it may usually be relieved by removing the offending substance. Sometimes, indeed, the articles taken will appear to have been digested, yet the disease will go on with great obstinacy, until some medicine is administered to alter the state of the secretions. In a case which happened to the writer, the offending substance appeared to have been eels taken at dinner; yet no particular oppression was perceived, and advice was not applied for till several days after, when the irritation of the disease became very troublesome, and was found not to yield to various remedies recommended by the patient's domestic counsellors. The eruption in this case was constant, but was found to be aggravated greatly at night. Under these circumstances an emetic was administered, followed by a cathartic, which proved entirely effectual the next day. The sympathy which exists between the digestive organs and the skin, and of which this disease is only one of many instances, is among the most extraordinary facts in the whole range of pathology; and would seem to hold out the promise that much more might be gained in the treatment of various forms of dyspepsia and hepatic disease, from endermic applications, than has yet been effected or imagined. We remember that some years since chronic hepatitis was treated in many instances with great success, by the extensive application to the cutaneous surface of diluted nitro-muriatic acid. The fashion, like other fashions in medicine, seems to have passed away; but it is a mode of treatment which has strong claims to a fair trial, and which might, we think, be revived with advantage in the management of many disorders in which the functions of the abdominal viscera are extensively impaired.

## EYE AND EAR INFIRMARY.

Drs. Jeffries and Reynolds, of the Boston Eye and Ear Infirmary, have presented to the Managers of that Institution the following Report.

The general relations of their department in this Charity have increased in interest during the past year, while the detail of incident has been of the same exciting character as in former times. This Institution has now existed sufficiently long to strip it of any adventitious circumstance which might bring it into undue estimation at its commencement, and to settle it upon the basis of its absolute merits. The novelty of its operation might bring a large number of chronic cases, existing at its first formation, to swell the number of its applicants. This would give the Institution an appearance of utility which the event would not fully justify. But sufficient time has now elapsed to show its real position. The result has more than equaled the most sanguine expectations of its first projectors.

The Surgeons have had repeated evidence of an increased respect and favor for it as an eleemosynary establishment. It is presumed that in this respect it stands distinctly pre-eminent, when its comparative resources and expenditures are considered.

As a school for the practical knowledge of those diseases which come under its cognizance, it has become more known and more appreciated. The number of students which have attended its weekly ministrations has increased during the past year, all of whom have become much interested in this branch of their profession.

An increased interest in the affections of the eye has been remarked abroad. The same growing esteem may be evidently noticed in our country; so that it may be confidently expected that the complaints of this noble organ will before long receive the attention which they so justly deserve.

By the books at the rooms, which record the places of residence of the applicants, it appears that individuals have come from sixty-four different places. The streams from this Charity have, therefore, flowed into the different sections of our State, and even into more distant parts. It would seem that this fact alone would present an irresistible claim to Legislative bounty; especially when it is considered that if the facilities for receiving patients under immediate inspection were augmented, its direct influence would be felt by those who were strangers in the city. If a house or hospital was provided for the reception of patients, the number of applicants from the different towns of our State would be very greatly increased, and the amount of good bestowed would be vastly extended.

The number of cases at the rooms has not been quite so large as hitherto. This has probably arisen from the unnecessary apprehension which has existed in visiting the city at a time when it was threatened by the invasion of the Malignant Cholera, which happened to be at that season of the year when there has usually been the greatest influx of foreign cases. This circumstance should be borne in mind when estimating the proportion of applicants from abroad.

It will be remembered, also, that, in the early part of the year which is included in this report, an epidemic Influenza prevailed in this section of our country as well as elsewhere, which, although from its character it might be supposed to induce the affections which we treat, yet from its severity and universality manifestly prevented patients from leaving their

homes. It was noticed at the rooms, during that season of sickness, that applications, even of patients within the city, almost ceased.

The Surgeons cannot refrain from the expression of their regrets that the limited resources of the Institution have so greatly cramped their efforts. The necessity of declining to receive many from abroad who were unable to provide a home in the city, and of sending to another Charity those which distinctly belonged to this—and especially the fact that many curable cases have been compelled to leave before they had recovered, have greatly embarrassed the operations, as well as distressed the feelings of the Surgeons. But they are cheered by the hope that this restricted state will not be much longer permitted by a liberal community; or if it is to be so for a time, they are still assured that they have laid the foundation of an edifice which must be reared at some future time.

The Surgeons are unwilling to close these preliminary remarks without noticing, with feelings of the most sincere gratitude, the bequest lately made to the funds of the institution by the legacy of Miss Belknap. Various circumstances tend to enhance the pleasure which they feel in the donation. Its influence is immediately felt in their department by being applied to the relief of the suffering applicants. It comes likewise from an individual who was personally known and most highly esteemed by them, and, having been preceded by a similar bequest from a lamented member of the same family, it stands as a pledge that the more closely the relations of the Institution are regarded, the more fully its merits are acknowledged. This act of generosity on the part of this truly benevolent lady, has doubly and inseparably united the memory of her family with the interests and regards of this Institution. During her life a broad stream of charity has flowed from her ample resources for the public good. She would not permit this benefit to end with her existence, but at her decease has poured the whole of these resources into the channel of public usefulness. The most prominent eleemosynary establishment of this city has shared most largely in her bounty, and owes her its lasting gratitude. The not less needed stream which has refreshed this Institution is as gratefully felt and as cheerfully acknowledged.

The Surgeons proceed to state the results of the past year.

The whole number of cases treated since the establishment of the Infirmary	-	-	-	-	-	-	5360
During the year past	-	-	-	-	-	-	660
The cases of affection of the Eye	-	-	-	-	-	-	540
Do. do. Ear	-	-	-	-	-	-	120
Of these there have been cured	-	-	-	-	-	-	512
Do. do. relieved	-	-	-	-	-	-	52
Do. do. not treated	-	-	-	-	-	-	40
Do. do. incurable	-	-	-	-	-	-	18
Do. do. now under treatment	-	-	-	-	-	-	38
The number of applicants from 64 towns out of the city							128

*Test for Coffee, &c.*—As that superficial but useful method of examining substances, termed *testing*, is in vegetables attended with difficulty, any attempt to simplify it must be useful: accordingly, I have made an analysis of Rye (*Secale cereale*) and Coffee (*Coffea arabica*), both raw and roasted. The former being very frequently used to adulterate the latter, I have

indicated a test for the detection of the fraud ; and as your Journal is, also, I believe, devoted partly to the diffusion of chemical science, I send it to you for publication.

	COFFEE.		RYE.	
	Raw.	Roasted.	Raw.	Roasted.
Lignin . .	50.5	49.0	20.6	18.0
Caffein . .	3.0	—	—	—
Tannin . .	—	2.0	—	—
Starch . .	—	—	49.4	—
Resin . .	1.5	6.0	5.0	7.0
Amidine* .	—	—	—	38.0
Gum . .	12.0	?	?	—
Albumen .	1.0	—	?	—
Gluten . .	—	—	4.0	2.0
Extractive matter .	26.0	30.0	18.0	20.0
Carbonized do. . .	—	8.0	—	11.0
Loss . .	6.0	5.0	3.0	4.0
	100	100	100	100

Now, as it is well known that iodine forms a blue iodide with amidine or starch, and as rye contains 38 per cent. of the former substance, when roasted, while it is absent from coffee, it follows that a mixture of roasted rye with roasted coffee is easy of detection, of which any one can convince himself by a simple experiment : for this purpose the alcoholic tincture of iodine is the most convenient form of the test.—*Medical Gazette.*

*Enervation productive of Cholera.*—Dr. Legros, of Paris, has published a note, in which he urges strongly the fact of any kind of nervous debility rendering the system peculiarly exposed to an attack of cholera. It is, however, to one source of exhaustion that he particularly alludes. The same observation has, indeed, been made by others ; but as it has not been sufficiently impressed upon the public, we think it right to bring it more pointedly under the notice of our readers. A case will render further explanation unnecessary. A young man of twenty-seven, when on the point of marriage, was seized with cholera : his illness was severe, and his convalescence slow ; however, having regained his health to a considerable extent, he would consent to delay his happiness no longer. He was married ; and, at four o'clock next morning, was attacked with cholera, having had no premonitory symptoms, and died in seven hours, notwithstanding the diligent employment of remedial means. Again, an old general left his house in good health, and was brought back in a dying state in two hours afterwards. What follows will read best in the original :—

‘ Interrogé sur ce qui avait précédé son indisposition, il nous apprit

\* I have here limited this term to starch torrefied below 480 degrees.

qu'il était bien le matin, qu'il n'avait pas de dévoiement, que cependant depuis environ trois mois il suait plus souvent, plus abondamment et non plus de facilité que de coutume, puis, après beaucoup de tergiversations, il avoua qu'il était allé avec une femme, et que c'était pendant de vains efforts pour exercer le coït, qu'il avait été pris de tremblemens de sucurs froides et de vomissemens."

He died in the course of a few hours, having neither purging nor cramps; but with severe vomiting and mortal collapse. It is in the case of convalescents and elderly persons that the attack under the circumstances alluded to has been chiefly met with.

---

*Effects of Darkness in producing Deformities.*—A correspondent writes us the following curious fact. There is at present in Paris an artist of the Louvre, an eminent historical painter, of the name of Ducornet, who paints with his feet. He was born without arms, of poor parents, at Lille. There are also about the French metropolis a number of beggars, twelve or thirteen of them at least, all deformed in various ways, and all born at Lille, in certain dark caverns under the fortifications. The effect of these places, from their want of light producing malformed births, is so notorious, that the magistrates of Lille have issued strict orders to prohibit the poor from taking up their abode in them. It is added by our correspondent, that he had a conversation with Mr. Edwards on the subject, and that gentleman was greatly struck with the confirmation which the above circumstances afford to his views, stated in his work, *Sur l'influence des agens physiques sur la vie*. Mr. Edwards's experiments of detaining tadpoles in darkness, and thus causing them to grow into gigantic and monstrous tadpoles, instead of being transformed into frogs, are well known.—*London Medical Gazette*.

---

*Science in Egypt.*—The Pacha of Egypt has made great exertions to introduce the most important improvements in science generally, and in medicine in particular, into his dominions. For this purpose he some years ago induced M. Clot, a French surgeon, to settle in Egypt, and patronized the establishment of a Medical School at Abouzabel, to the proceedings of which we have repeatedly alluded. The Pacha has recently created his French *protégé* a Bey, so that he now figures under the somewhat ludicrous appellation of *Clot-Bey*; and his patron is about to despatch him with 12 young Egyptians to Paris, where they are to be educated in the most complete manner, and on their return to be appointed Professors of the different branches of knowledge they have acquired. Who knows but it may be destined that science shall again, as in times of old, find a resting place in Egypt?—*Id.*

---

*Mortality from Cholera in Paris.*—From the 26th of March (when cholera broke out in Paris) to August 31st, inclusive, the number of deaths reported were 17,978. April and July were the most fatal months: the former gives 12,723, and the latter 2577 deaths, the mortality of the other three months taken together being but 2678.

---

*Cholera Intelligence.*—The French government has distributed a number of medals to those among the inhabitants of Paris who were most conspicuous in their philanthropic exertions during the late epidemic.



**Insomnolence cured by Sulphate of Quina.**—M. Barbier, of the Hôtel Dieu, Amiens, relates the following case :—A man, aged 42, had cholera, from which he recovered ; all the functions were restored, except that his sleep was destroyed ; scarcely had he an hour's rest altogether in the course of each night ; laudanum and other soporifics were exhibited without effect. M. Barbier found, on examination, that every evening he had a nervous 'agitation,' which lasted all night, accompanied by some pain in the head and limbs. Looking to the periodicity of the affection, M. Barbier ordered six grains of sulphate of quina every night. It was given two nights ; he slept well ; it was then omitted ; he had no rest. The medicine was again renewed, and continued, with the effect of permanently procuring six or seven hours of sound sleep.—*Gaz. Med.*

**Musk in Flooding.**—In uterine hæmorrhage, particularly after labor which has been too precipitate, Dr. Hauff states that he has found musk, in doses of eight or ten grains every quarter of an hour, or every half hour, to be an excellent remedy.—*Medizinisches Conversations-Blatt.*

Whole number of deaths in Boston for the week ending Nov. 24, 36. Males, 22—Females, 14.  
Of inflammation in the bowels, 1—delirium tremens, 1—consumption, 6—accidental, 1—hooping cough, 4—influenza, 1—old age, 3—marasmus, 1—lung fever, 5—intemperance, 1—cholera malignant, 5—infantile, 1—typhous fever, 2.

### ADVERTISEMENTS.

#### MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at BOWDOIN COLLEGE will commence on MONDAY, the 18th day of February, 1833.

Theory and Practice of Physic, by JOHN DELAMATER, M.D.

Anatomy and Surgery, by REUBEN D. MUSSEY, M.D., Professor at Dartmouth College.

Obstetrics and Medical Jurisprudence, by JAMES MCKEEN, M.D.

Chemistry and Materia Medica, by PARKER CLEAVELAND, M.D.

The ANATOMICAL CABINET is extensive, and the LIBRARY is one of the most valuable Medical Libraries in the United States. Both are annually increasing.

Every person, becoming a member of this Institution, is required previously to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures, is \$50. Graduating fee, including diploma, \$10. There is no Matriculating nor Library fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September.

Boarding may be obtained in the Commons Hall at a very reasonable price.

P. CLEAVELAND, Secretary.

Brunswick, October 8, 1832.

Oct. 31. eop54.

#### SURGICAL INSTRUMENTS

MADE and REPAIRED in the neatest manner, at A. P. RICHARDSON'S Manufactory, No. 21 Devonshire Street, two doors from Water Street, Boston.

N. B. Orders from Physicians residing in the country, punctually attended to.

August 22, 1832.

eop3m

#### ALLEN & TICKNOR,

HAVING purchased of Messrs. CARTER & HENDEE the retail department of their Bookselling Establishment, including their general stock of Medical Books, will continue the business at the store lately occupied by C. & H., corner of School and Washington Streets, where they will keep constantly on hand a complete assortment of Medical, Theological, School and Miscellaneous Books, and a complete assortment of Stationary, Cutlery, &c. &c., English and American, wholesale and retail.

N. B. Particular attention paid to Medical Books.

#### The Physician's Case Book.

Just published, by Allen & Ticknor, A Case Book for Registering Cases and Occurrences that may be considered important in Medical and Surgical Practice.

eop3t.

Oct. 24.

#### THE BOSTON MEDICAL AND SURGICAL JOURNAL

IS PRINTED AND PUBLISHED EVERY WEDNESDAY, BY CLAPP AND HULL,

At 184 Washington Street, corner of Franklin Street, to whom all communications must be addressed, *Post-paid.* It is also published in Monthly Parts, on the 1st of each month, each Part containing the numbers of the preceding month, stitched in a cover.—Price \$3.00 per annum in advance, \$3.50 if not paid within six months, and \$4.00 if not paid within the year.—*Postage the same as for a newspaper.*